



DEVELOPMENT/ZONING CHANGE APPLICATION

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Case # _____ (assigned by staff)

SUBJECT PROPERTY INFORMATION

Subdivision Name, Block, Lot: _____ # of lots: _____ # of acres: _____

Location: _____

Project Name: _____

Purpose / Intent: _____

Current Zoning: _____ Proposed Zoning (if applicable): _____

OWNER AND AUTHORIZATION

Name: (print or type) _____

Company Name: _____

Address: _____ Phone: _____

City, State, Zip: _____ Fax: _____

Email: _____

CHECK ONE OF THE FOLLOWING:

- ☐ I will represent the application myself; or
☐ I hereby designate _____ (name of project representative) to act in the capacity as my agent for submittal, processing, representation, and/or presentation of this development application. The designated agent shall be the principal contact person for responding to all requests for information and for resolving all issues of concern relative to this application.

I hereby certify that I am the owner of the property and further certify that the information provided on this development application is true and correct. By signing below, I agree that the City of Frisco (the "City") is authorized and permitted to provide information contained within this application, including the email address, to the public. The City is also authorized and permitted to reproduce any copyrighted information submitted in connection with the application, if such reproduction is associated with the application in response to a Public Information Request.

Owner's Signature: _____ Date: _____

STATE OF TEXAS

COUNTY OF _____

BEFORE ME, a Notary Public, on this day personally appeared _____ (printed owner's name) the above signed, who, under oath, stated the following: "I hereby certify that I am the owner, or duly authorized agent of the owner, for the purposes of this application; that all information submitted herein is true and correct."

SUBSCRIBED AND SWORN TO before me, this the _____ day of _____, 20 _____.

Notary Signature

Notary Seal

PROJECT REPRESENTATIVE/APPLICANT

Name: (print or type) _____

Company Name: _____

Address: _____ Phone: _____

City, State, Zip: _____ Fax: _____

Email: _____

Project Representative's Signature: _____ Date: _____



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SUBMITTAL INFORMATION

1. INCOMPLETE APPLICATIONS AND SUBMITTALS WILL BE REJECTED or will be returned; an application may be deemed incomplete after initial staff review (completed within 10 days of the submittal).
2. Prior to submittal, we strongly recommend setting up and attending a pre-submittal meeting.
3. A meeting with the HOA(s) is recommended for all project types, and is required for Zoning, PD, SUP requests. Meeting(s) with the representatives of adjacent HOA's are necessary prior to scheduling of a public hearing date.
4. See Zoning & Development Fees contained within the Development Application Handbook www.friscotexas.gov/departments/planningDevelopment/planning/Pages/DevelopmentApplicationHandbook.aspx
5. All plans, except Engineering Construction Sets, shall be 24" x 36" and folded.

ADDITIONAL DOCUMENTS REQUIRED AT TIME OF SUBMITTAL

For Submittal Requirements for each type, refer to the Development Application Handbook at the web site noted above but at a minimum, the following must be provided:

- ☐ Applicable checklist(s) completed and signed by preparer
- ☐ City tax statements for all projects. Electronic form is acceptable and available from www.co.collin.tx.us.
- ☐ List of proposed street names for preliminary plats and preliminary site plans. See *Street Name Approval Criteria*.
- ☐ For zoning change requests, submit a CD containing the meets and bounds description in MS Word format and exhibits in PDF format.

FEES RELATED DEVELOPMENT APPLICATIONS (NON ZONING CHANGES)

NON-RESIDENTIAL - Items Submitted	Filing Fees	RESIDENTIAL - Items Submitted	Filing Fees
<input type="checkbox"/> Preliminary Site Plan – 9 plans	\$ _____	<input type="checkbox"/> Preliminary Plat – 9 Plans	\$ _____
<input type="checkbox"/> Site Plan – 9 Plans	\$ _____	<input type="checkbox"/> Minor Amendment – 9 Plans	No Charge
<input type="checkbox"/> Substantially Conforming Site Plan – 9 Plans	\$ _____	<input type="checkbox"/> Amending Plat/Plat Vacation – 9 Plans	\$ _____
<input type="checkbox"/> Amending Plat/Plat Vacation – 9 Plans	\$ _____	<input type="checkbox"/> Minor Plat – 9 Plans	\$ _____
<input type="checkbox"/> Final Plat or Replat – 9 Plans	\$ _____	<input type="checkbox"/> Final Plat or Replat – 9 Plans	\$ _____
<input type="checkbox"/> Conveyance Plat – 9 Plans	\$ _____	<input type="checkbox"/> Conveyance Plat – 9 Plans	\$ _____
<input type="checkbox"/> Construction Set – 4 Sets & pdf (on CD)	No Charge	<input type="checkbox"/> Preliminary Utility Plan – 3 Plans	No Charge
<input type="checkbox"/> Façade Plan – 1 color & 1 b/w set	No Charge	<input type="checkbox"/> Preliminary Drainage Plan – 3 Plans	No Charge
<input type="checkbox"/> Landscape Plans – 1 Set & pdf (on CD)	No Charge	<input type="checkbox"/> Construction Set – 4 Sets & 1 pdf (on CD)	No Charge
<input type="checkbox"/> Detailed Tree Survey – 1 Plan	No Charge	<input type="checkbox"/> Landscape Plans – 1 Set & pdf (on CD)	No Charge
<input type="checkbox"/> Traffic Impact Analysis (TIA) – 2 copies	\$ _____	<input type="checkbox"/> Detailed Tree Survey – 1 Plan	No Charge
<input type="checkbox"/> Development Agreement – 2 copies	\$ _____	<input type="checkbox"/> Development Agreement – 2 copies	\$ _____
<input type="checkbox"/> Proportionality Appeal	\$ _____	<input type="checkbox"/> Minor or Major Waiver	No Charge
<input type="checkbox"/> Vested Rights Petition	\$ _____	<input type="checkbox"/> Proportionality Appeal	\$ _____
<input type="checkbox"/> Comprehensive Plan Amendment	\$ _____	<input type="checkbox"/> Vested Rights Petition	\$ _____
		<input type="checkbox"/> Comprehensive Plan Amendment	\$ _____
TOTAL	\$ _____	TOTAL	\$ _____

FEES RELATED TO ZONING CHANGE REQUESTS

	Filing Fees
<input type="checkbox"/> Straight Zoning (Non PD or Specific Use Permit) – 9 copies of Exhibits	\$ _____
<input type="checkbox"/> Specific Use Permit – 9 copies of Exhibit A and Exhibit B	\$ _____
<input type="checkbox"/> Planned Development – see PD Checklist	\$ _____
<input type="checkbox"/> Traffic Impact Analysis (TIA) – 2 copies	\$ _____
<input type="checkbox"/> Traffic Circulation Study (SUP only)	No Charge
Total	\$ _____

OFFICE USE ONLY

This application was received by:

Staff Signature _____

Date _____